

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/517,332		Filing Date 12 April, 2006			<input type="checkbox"/> To be Mailed				
				Applicant(s) CARRIER ET AL.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 04/07/2010		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1					51					
2				X				52					
3				(1)				53					
4				(1)				54					
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7				(1)				57					
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9				(1)				59					
10				(1)				60					
11				(1)				61					
12				X				62					
13				1				63					
14				1				64					
15				1				65					
16				X				66					
17				1				67					
18				(1)				68					
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47								97					
48								98					
49								99					
50								100					
Total Indep			1					Total Indep					
Total Depend				19				Total Depend					
Total Claims			20					Total Claims					

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